

# Expression of Interest

## IWFM Regions/SIGs/Networks: new members



<b>Name:</b>																			
<b>Address:</b>																			
<b>Employer:</b>																			
<b>Business Address:</b>																			
<b>Job title:</b>																			
<b>Telephone Number:</b>					<b>Email Address:</b>														
<b>Membership Grade:</b>					<b>Name of Committee:</b>														
<b>Please note that you must hold current IWFM membership to hold a Committee position</b>																			
Would you like to be considered for any of the following roles on the committee* (please mark with an X):																			
<b>Chair –Must hold Member grade (MIWFM) or above</b>																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;"><b>Deputy Chair</b></td> <td style="width: 15%;"></td> <td style="width: 15%;"><b>Secretary</b></td> <td style="width: 15%;"></td> <td style="width: 15%;"><b>Event Co-ordinator</b></td> <td style="width: 15%;"></td> <td style="width: 15%;"><b>Treasurer</b></td> <td style="width: 15%;"></td> <td style="width: 15%;"><b>Other Committee Position(s)</b></td> <td style="width: 15%;"></td> </tr> </table>										<b>Deputy Chair</b>		<b>Secretary</b>		<b>Event Co-ordinator</b>		<b>Treasurer</b>		<b>Other Committee Position(s)</b>	
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<b><u>Committee Role</u> (maximum: 250 words)</b>																			
If you wish to be considered for a specific role on the committee, please explain the reasons you are interested in undertaking this role below:																			

# Expression of Interest: new committee members

## **Expression of Interest Statement (maximum: 250 words)**

Please detail below (within 250 words) the reasons why you wish to join the committee. Please explain what your experience and knowledge will bring to the group (including qualifications and experience if applicable). The purpose of this is to enable us to understand your requirements and how we can meet them.

If you have any locations, venues, sponsorship opportunities available to support group activities, meetings or events? Please provide details below:

I confirm:

1. I am able to attend, notwithstanding unforeseeable events, regular committee meetings as required
2. To abide by the IWFM Professional Code of Conduct, to sign the Confidentiality Contract and Declaration of Interest
3. I am aware that communications concerning IWFM Meetings can be confidential and remain the property of IWFM. Many communications are conducted via the website and email; therefore, I confirm my ability to interact with the Institute in this way.

Full Name:

Signature:

Date:

**Please note that by completing the Expression of Interest Form you are consenting to sharing the details within this form amongst the relevant Region or SIG committee members** (such representatives are obliged to comply with a Code of Conduct in relation to their use and storage of your personal data)  
**Your data will be handled in accordance with the [IWFM Privacy Policy](#)**